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2012 JAN -6

FEC MAIL CENTER

David W. Asp

Phone: 612-339-6900

dwasp@locklaw.com

REPLY TO MINNEAPOLIS

December 30, 2011

Federal Election Commission

999 E Street NW

Washington, DC 20463

Re: FORM 1 – Statement of Organization for Action4Liberty

Dear FEC:

Enclosed for filing is the Form 1 Statement of Organization for Action4Liberty. Consistent with *SpeechNow v. FEC*, 599 F. 3d 686 (D.C. Cir. 2010), Action4Liberty intends to make independent expenditures and raise money in unlimited amounts to support those expenditures. Action4Liberty will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to any federal candidate or federal candidate's committee.

Please do not hesitate to contact me with questions or concerns.

Sincerely,



David Asp

DWA/jak

Enclosure

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
2012 JAN -6 AM 8:46
FEC MAIL CENTER
Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Action4Liberty

ADDRESS (number and street)

3500 Vicksburg Lane North

☐

(Check if address
is changed)

Suite 400-330

Plymouth

MN

55447

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐

(Check if address
is changed)

brian-baker@comcast.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

www.action4liberty.com

2. DATE

12 / 30 / 2011

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brian Baker

Signature of Treasurer

Brian Baker

Date

12 / 30 / 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate
Party AffiliationOffice
Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☒ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

12030701852

Write or Type Committee Name

Action4Liberty

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

3500 Vicksburg LN N. Suite 400-380

Plymouth

CITY

MN

STATE

55447

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Brian Baker

Mailing Address

7332 Niagara Lane N.

Maple Grove

CITY

MN

STATE

55311

ZIP CODE

Title or Position

Treasurer

Telephone number

612 - 513 - 7733

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Brian Baker

Mailing Address

7332 Niagara Lane N.

Maple Grove

CITY

MN

STATE

55311

ZIP CODE

Title or Position

Treasurer

Telephone number

612 - 513 - 7733

12030701853

Full Name of
Designated
Agent

Brian Baker

Mailing Address

7332 Niagara Lane N.

Maple Grove

CITY

MN

STATE

55311

ZIP CODE

Title or Position

Treasurer

Telephone number

612 - 513 - 7733

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

TCF

Mailing Address

8150 Wedgewood LN N

Maple Grove

CITY

MN

STATE

55369

ZIP CODE

Name of Bank, Depository, etc.

TCF

Mailing Address

8150 Wedgewood LN N

Maple Grove

CITY

MN

STATE

55369

ZIP CODE

12030701854

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 12/30/11
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2005)

1/6/12
DATE PREPARED

12030701855